

U.S.D.C.
S.D.N.Y.
February 14, 2013

Dear Chief Justice Loretha A. Preska

9087
12.civ.9078
Carter vs. J. Carroll

Your Honor:

It would deeply appreciate if you would attach the enclosed medical records to my complaint against New York State Correctional officer J. Carroll 12.civ.9078.

USDC SDNY
DOCUMENT
ELECTRONICALLY FILED

DATE FILED:

2/14/13

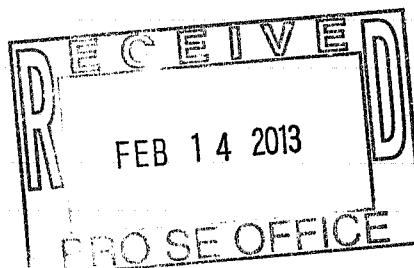
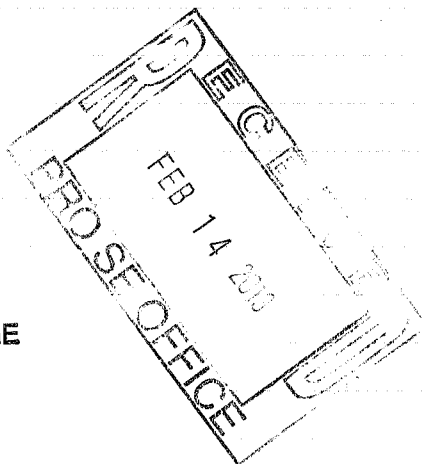
Thank you
David Carter

Pro SE
12A5083

RECEIVED

FEB 13 2013

LORETHA A. PRESKA
CHIEF U.S. DISTRICT JUDGE
S.D.N.Y.



sensitive to the effects of this medicine, especially stomach bleeding or kidney problems. FOR WOMEN: THIS MEDICINE MAY HARM THE FETUS. Do not use it during the last 3 months of pregnancy. IF YOU THINK YOU MAY BE PREGNANT, discuss with your doctor the benefits and risks of using this medicine during pregnancy. This medicine should not be used during labor. THIS MEDICINE IS EXCRETED IN BREAST MILK. IF YOU ARE OR WILL BE BREAST-FEEDING while you are using this medicine, check with your doctor or pharmacist to discuss the risks to your baby.

POSSIBLE SIDE EFFECTS: SIDE EFFECTS that may occur while taking this medicine include upset stomach, nausea, heartburn, gas, headache, diarrhea, constipation, drowsiness, stuffy nose, or dizziness. If they continue or are bothersome, check with your doctor. CONTACT YOUR DOCTOR IMMEDIATELY if you experience bloody or black, tarry stools; change in the amount of urine produced; chest pain; confusion; dark urine; depression; fainting; fast or irregular heartbeat; fever, chills, or persistent sore throat; loss of appetite; mental or mood changes; numbness of an arm or leg; one-sided weakness; pale stools; red, swollen, blistered, or peeling skin; ringing in the ears; seizures; severe headache, dizziness, or vomiting; severe or persistent stomach pain or nausea; shortness of breath; sudden or unexplained weight gain; swelling of hands, legs, or feet; unusual bruising or bleeding; unusual joint or muscle pain; unusual tiredness or weakness; vision or speech changes; vomit that looks like coffee grounds; or yellowing of the skin or eyes. AN ALLERGIC REACTION to this medicine is unlikely but seek immediately medical attention if it occurs. Symptoms of an allergic reaction include rash; hives; itching; trouble breathing; tightness in the chest; swelling of the mouth, face, lips, or tongue; or wheezing. If you notice other effects not listed above, contact your doctor, nurse, or pharmacist. This is not a complete list of all side effects that may occur. If you have questions about side effects, contact your healthcare provider. Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

OVERDOSE: If overdose is suspected, contact your local poison control center or emergency room immediately. Symptoms of overdose may include decreased urination, loss of consciousness, seizures, severe dizziness or drowsiness, severe nausea or stomach pain, slow or troubled breathing, unusual bleeding or bruising, or vomit that looks like coffee grounds.

ADDITIONAL INFORMATION: If your symptoms do not improve or if they become worse, check with your doctor. DO NOT SHARE THIS MEDICINE with others for whom it was not prescribed. DO NOT USE THIS MEDICINE for other health conditions. IF YOU WILL BE TAKING THIS MEDICINE FOR AN EXTENDED PERIOD OF TIME, be sure to obtain necessary refills before your supply runs out. CHECK WITH YOUR PHARMACIST about how to dispose of unused medicine.

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This information may not be complete. Please consult your primary care provider for further questions or concerns.

12.civ. 1078 10087
Carter vs. J. Carroll**The Mount Sinai Hospital - New York, NY**
Inpatient FacesheetMedical Record Number
2876043

Patient's Name CARTER, DAVID		Gender Male	Race African American
Social Security Number XXX-XX-7793	Age 43 Years	Date of Birth: 08/21/1964	Religion Christian
Patient Address MANHATTAN P.C. WARDS, 600 EAST 125TH STREET NEW YORK, NY 10035			Patient Phone: (646) 672-6626 (H)

Employment Status Not Employed	Employer Name Default Employer	Patient Work Phone
Employer Address		Employer Phone

Next of kin CARTER, CHARLES	Relationship to Patient Other	NOK Phone (718) 385-5789 (H)	NOK Work Phone
Emergency Contact CARTER, CHARLES	Relationship to Patient Other	EMC Phone (718) 385-5789 (H)	EMC Work Phone

Admit Date 05/28/2008	Admit Time 11:38	Visit Number: 000044659397	Reason for Admission 63047, 69990 RIGHT L5-S1 MICRO
Estimated Arrival Date 05/28/2008	Admit Source Referral-Physician		Point of Origin Non Health Care Facility
Admitting Diagnosis 722.10 - DISPLACEMENT OF LUMBAR INTERVERTEBRAL DISC WITHOUT MYELOPATHY			
Nursing Unit - Room - Bed NO8W 105 P	Private Room Accommodation Reason Only Available Bed		Admit Type Elective-Surgical/DAS
Core Center Neurosciences & GI CC	Specialty Neurosurgery	Medical Service Neurosurgery Team	

Admitting Physician Chen, Chun S	Distation Code 03358	Admitting Physician Department
Attending Physician Chen, Chun S	Distation Code 03358	Attending Physician Department

Insurance 1 Health Plan Name MANHATTAN PSYCHIATRIC CENTER	Policy Number 056587793	Group Name	Group Number
Health Plan Address 600 E.125TH STREET New York, NY 10035			HP Phone Number

Insurance 2 Health Plan Name	Policy Number	Group Name	Group Number
Health Plan Address			HP Phone Number

Insurance 3 Health Plan Name	Policy Number	Group Name	Group Number
Health Plan Address			HP Phone Number

Encounter Comment (line 1 tab) 05/28/08-----M.MERIZALDE				
Patient Directory 1. List name and location	NYS Rights Info Yes	NOPP Signed Yes	Chaplain Visit No	Patient is Requesting Semi-Private

Initial Consultation
RE: Carter, David
May 22, 2008

The patient is a 43-year-old right-handed male. He was examined today April May 22, 2008 at the office located at 5 East 98th street 7th floor. Patient came to his office visit accompany by one correctional officers. Patient is living at the correctional institution (manhattan psychiatric Center) and referral by the physician Dr. Garcia because of lumbar MRI finding of large L5-S1 disc herniation.

For 6 months the patient is having persistent low back pain radiated to his right lower extremity associated with numbness at the pain distribution. Patient brought the hard copy of cervical MRI dated 5/9/2008 shows severe lumbar disc herniation, associated with thecal sac and nerve root compression.

Past medical history: He denied HTN, DM, increase cholesterol and CA. Patient has been admitted at the Manhattan Psychiatric Center for 18 months.

Past surgical history: Few years ago he had removal of the lipoma located behind his right ear. He does not remember the time frame of this surgical procedure.

Medications: Quetiapine Fumarate, Zolpidem, Ziprasidone mesylate, Risperidone M, Enalapril, Valproic acid, Famotidine, Lidocaine, Varenicline, Lactic acid, ibuprofen, Cyclobenzaprine, Benzotropine, Codeine, Psyllium, Colace.

He denied medication allergy.

He smokes two cigarettes per day and is a social alcohol drinker.

He is single has no child. His father died of CHF. His parents are healthy. He has 2 healthy sisters.

The following systems were reviewed:
Patient denied weight loss or fever. Denied heart of cardiovascular dysfunction. Denied kidney of genitourinary system dysfunction. Denied skin lesion. He denied gastrointestinal dysfunction. He denied endocrine system dysfunction. He denied problem with his eyes and ears.

NEUROLOGICAL EXAMINATION

On neurological exam he is fully awake and oriented x3.

The patient walks in small steps due to the pain. Romberg sign was negative. He was able in performing tandem walk also in small steps due to the pain.

He has normal sensory to touch, vibration and segmental position.

He has globally decrease tendon reflexes on all four extremities He does not have Hoffman or Babinski sign. He does not have clonus.

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Carter vs J. Carroll

Rx # 240-210345

NAPROXEN 500MG TAB

GENERIC NAME: NAPROXEN (na-PROX-en)

COMMON USES: This medicine is a nonsteroidal anti-inflammatory drug (NSAID) used to treat rheumatoid arthritis, osteoarthritis, ankylosing spondylitis, and juvenile arthritis. It is used to treat tendonitis, bursitis, gout, menstrual cramps, or mild to moderate pain. It may also be used for other conditions as determined by your doctor.

BEFORE USING THIS MEDICINE: WARNING: This medicine is a nonsteroidal anti-inflammatory drug (NSAID). It may cause an increased risk of serious and sometimes fatal heart and blood vessel problems (eg, heart attack, stroke). The risk may be greater if you already have heart problems or if you take this medicine for a long time. Do not use this medicine right before or after bypass heart surgery. **THIS MEDICINE MAY CAUSE** an increased risk of serious and sometimes fatal stomach ulcers and bleeding. Elderly patients may be at greater risk. This may occur without warning signs. Some medicines or medical conditions may interact with this medicine. **INFORM YOUR DOCTOR OR PHARMACIST** of all prescription and over-the-counter medicine that you are taking. **DO NOT TAKE THIS MEDICINE** if you are also taking another medicine that contains naproxen. **ADDITIONAL MONITORING OF YOUR DOSE OR CONDITION** may be needed if you are taking angiotensin-converting enzyme (ACE) inhibitors (eg, enalapril), anticoagulants (eg, warfarin), antiplatelet medicines (eg, clopidogrel, prasugrel), aspirin, beta-blockers (eg, propranolol), bisphosphonates (eg, alendronate), corticosteroids (eg, prednisone), cyclosporine, diuretics (eg, furosemide, hydrochlorothiazide), heparin, hydantoins (eg, phenytoin), lithium, methotrexate, probenecid, quinolones (eg, ciprofloxacin), rivaroxaban, selective serotonin reuptake inhibitors (SSRIs) (eg, fluoxetine), sulfonamides (eg, sulfamethoxazole), sulfonyleureas (eg, glipizide), or other NSAIDs (eg, ibuprofen). **DO NOT START OR STOP** any medicine without doctor or pharmacist approval. Inform your doctor of any other medical conditions, including poor health, dehydration, low fluid volume, low blood sodium levels, allergies, pregnancy, or breast-feeding. Tell your doctor if you have, or are at risk for, high blood pressure, blood disorders, bleeding or clotting problems, heart problems (eg, heart failure), or blood vessel disease. Tell your doctor if you have a history of alcohol abuse, kidney or liver disease, diabetes, stomach or bowel problems (eg, bleeding, perforation, ulcers), swelling or fluid buildup, asthma, growths in the nose (nasal polyps), or mouth inflammation. Tell your doctor if you drink alcohol, smoke, or are on a low salt (sodium) diet. **USE OF THIS MEDICINE IS NOT RECOMMENDED** if you are going to have or have recently had bypass heart surgery, or if you are in the last 3 months of pregnancy. Contact your doctor or pharmacist if you have any questions or concerns about taking this medicine.

HOW TO USE THIS MEDICINE: Follow the directions for using this medicine provided by your doctor. This medicine has a **MEDICATION GUIDE** approved by the U.S. Food and Drug Administration. Read it carefully. Ask your doctor, nurse, or pharmacist any questions that you may have about this medicine. **TAKE THIS MEDICINE** with a full glass (8-oz./240 ml) of water as directed by your doctor. **THIS MEDICINE MAY BE TAKEN WITH FOOD** if it upsets your stomach. Taking it with food may not decrease the risk of stomach or bowel problems (eg, bleeding, ulcers) that may occur while taking this medicine. Talk with your doctor or pharmacist if you experience persistent stomach upset. **IF YOU TAKE ANTACIDS, CHOLESTYRAMINE, OR SUCRALFATE**, ask your doctor or pharmacist how to take them with this medicine. **STORE THIS MEDICINE** at room temperature between 59 and 86 degrees F (15 and 30 degrees C) in a tightly-closed container, away from heat, moisture, and light. **KEEP THIS MEDICINE** out of the reach of children and away from pets. **IF YOU MISS A DOSE OF THIS MEDICINE** and you are taking it regularly, take it as soon as possible. If it is almost time for your next dose, skip the missed dose and go back to your regular dosing schedule. Do not take 2 doses at once.

CAUTIONS: **DO NOT TAKE THIS MEDICINE** if you have had an allergic reaction to it, to any ingredient in this product, to aspirin, or to an NSAID (eg, piroxicam, ibuprofen). An allergic reaction includes a severe rash, hives, breathing difficulties, or dizziness. If you have a question about whether you are allergic to this medicine or if a certain medicine is a nonsteroidal anti-inflammatory drug, contact your doctor or pharmacist. **DO NOT EXCEED THE RECOMMENDED DOSE** or use for longer than prescribed without checking with your doctor. Laboratory and/or medical tests, including blood counts, kidney function tests, and blood pressure, may be performed to monitor your progress or to check for side effects. **KEEP ALL DOCTOR AND LABORATORY APPOINTMENTS** while you are taking this medicine. **THIS MEDICINE MAY AFFECT CERTAIN LAB TEST RESULTS.** Make sure laboratory personnel and your doctors know you use this medicine. **BEFORE YOU HAVE ANY MEDICAL OR DENTAL TREATMENTS, EMERGENCY CARE, OR SURGERY**, tell the doctor or dentist that you are using this medicine. This medicine may cause dizziness or drowsiness. **DO NOT DRIVE, OPERATE MACHINERY, OR DO ANYTHING ELSE THAT COULD BE DANGEROUS** until you know how you react to this medicine. Using this medicine alone, with other medicines, or with alcohol may lessen your ability to drive or to perform other potentially dangerous tasks. **SERIOUS STOMACH ULCERS OR BLEEDING CAN OCCUR** with the use of this medicine. Taking it in high doses or for a long time, smoking, or drinking alcohol increases the risk of these side effects. Taking this medicine with food will **NOT** reduce the risk of these effects. Contact your doctor or emergency room at once if you develop severe stomach or back pain; black, tarry stools; vomit that looks like blood or coffee grounds; or unusual weight gain or swelling. **DO NOT SWITCH BETWEEN DIFFERENT FORMS OF THIS MEDICINE** (eg, tablets, suspension) unless your doctor tells you to. They may not provide the same amount of medicine to your body. **BEFORE YOU BEGIN TAKING ANY NEW MEDICINE**, either prescription or over-the-counter, check with your doctor or pharmacist. This includes any medicines containing naproxen or any other NSAID (eg, ibuprofen). Do not take aspirin while you are using this medicine unless your doctor tells you to. **CAUTION IS ADVISED WHEN USING THIS MEDICINE IN THE ELDERLY** because they may be more

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**MOUNT SINAI MEDICAL CENTER
DEPARTMENT OF NEUROSURGERY
OPERATIVE REPORT**

PATIENT NAME **UNIT NUMBER:** **DATE OF SURGERY:**

CARTER, DAVID **2876043** **5/28/2008**

SURGEON: **CHUN SIANG CHEN, M.D.**

ASSISTANT:

ANESTHESIA: **GENERAL INTUBATION
DR. SCHWARTZ**

PREOPERATIVE DIAGNOSIS:

**RIGHT L5-S1 DISC HERNIATION
+ MULTIPLE EXTRUDED DISC FRAGMENT
+ RIGHT FACET HYPERTROPHY, LIGAMENTUM
FLAVUM HYPERTROPHY AND FORAMEN
STENOSIS**

POSTOPERATIVE DIAGNOSIS: **SAME**

PROCEDURE:

**RIGHT L5-S1 MICRODISCECTOMY
+ REMOVAL OF MULTIPLE EXTRUDED DISC
FRAGMENT
+ RIGHT L5-S1 MEDIAL FACETECTOMY
+ RIGHT L5-S1 FORAMINOTOMY
+ REMOVAL OF HYPERTROPHYIC LIGAMENTUM
FLAVUM**

**OPERATIVE MICROSCOPE USING
MICROSURGICAL TECHNIQUE AND
MICROSURGICAL INSTRUMENT**

INDICATION:

The patient is a 43-year-old right-handed male. Patient has psychiatric disorder and lives at the correctional institution (Manhattan psychiatric Center).

For 6 months the patient is having persistent low back pain radiated to his right lower extremity associated with numbness at the pain distribution. MRI of lumbar spine dated 5/9/2008 shows severe lumbar disc herniation, associated with thecal sac and nerve root compression. Patient does not respond to the clinical treatment then the surgical treatment was indicated.

FINDINGS:

RIGHT L5-S1 DISC HERNIATION

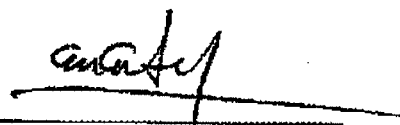
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the thecal sac and the right S1 nerve root. The facet hypertrophy and foramen stenosis were also evident at this level. The right S1 nerve roots were seen tight in the canal and further medial facetectomy and foraminotomy was performed in order to reassure the good decompression of right S1 nerve roots.

Under high magnification the veins in the left side of lateral and anterior portion were coagulated. The bulging disc at L5-S1 level was exposed on the right. After appropriated protection of thecal sac and right S1 nerve roots then the number eleven blade was used to incise the right side of the disc interspace. Degenerative disk material began to extrude and was removed with pituitary forceps of various size and angulations. The interspace was entered and further disk material removed. After the interspace was adequately emptied with pituitary forceps, down going curette was used to free additional disk material which was thereafter removed.

The hemostasis was obtained by bipolar coagulator, bone wax and the placement of SurgeFoam and Gelfoam. There is no evident of cerebral spinal leakage. The wound was copiously irrigated with warm saline. The cottonoid count was correct.

The aponeurose of para vertebral muscle was closed by using 2-0 Vicryl suture. The subcutaneous layer was closed using interrupted inverted 3-0 Vicryl suture. The skin was closed using 3-0 Monocryl. A dry sterile dressing was applied over the surgical incision. The drapes were removed. The patient was extubated and found to be moving all four extremities, obey well to command. No motor or sensory deficits and no radiated pain to her bilateral lower extremities. The patient was then taken to the recovery room prior to being sent to the regular surgical floor. The patient tolerated the procedure well, without any apparent complications. I was present, scrub and performed the entire surgical procedure.


CHUN SIANG CHEN, M.D.

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THE MOUNT SINAI HOSPITAL

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PLEASE DISPOSE OF PAPER COPIES APPROPRIATELY

Printed By: ABNER, DARREL

Name: **CARTER, DAVID (2876043)** Age: **48y (08/21/1964)** Male IP Loc: **DISCHARGED**

Status: **Final**

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THE MOUNT SINAI MEDICAL CENTER, NEW YORK, NY

DISCHARGE SUMMARY REPORT

PT NAME: **CARTER, DAVID**

MEDICAL RECORD NUMBER: **2876-043**

ACCOUNT #: **44659397**

DICTATOR MD#: **064041**

DICTATOR NAME: **ABILASH HARIDAS, MD**

ATTENDING MD#: **003358**

ATTENDING NAME: **CHUN CHEN, MD**

05/30/2008

ADMIT DATE: **05/28/2008**

DISCH DATE: **05/30/2008**

PRIMARY DIAGNOSIS: **LUMBAR RADICULOPATHY.**

SECONDARY DIAGNOSIS: **SCHIZOPHRENIA, DIABETES AND HIGH CHOLESTEROL.**

ALLERGIES: **THE PATIENT DENIES ANY MEDICATION ALLERGIES.**

HISTORY OF PRESENT ILLNESS: **The patient is a 43 year old male with a history of schizophrenia who lives in a correctional institution and is referred for right flexion radiculopathy.**

Electronically Signed By

CHUN CHEN, MD 08/11/2008 19:06

CHUN CHEN, MD

HYP

D:05/30/2008 T:06/02/2008/HTSSD I:06/03/2008 7:10 A

JOB#:340830 DOC#:320681

cc: CHUN CHEN, MD

Status: **Final**

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THE MOUNT SINAI MEDICAL CENTER, NEW YORK, NY

DISCHARGE SUMMARY REPORT

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THE MOUNT SINAI HOSPITAL

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Printed By: ABNER, DARREL

Name: **CARTER, DAVID (2876043)** Age: **48y (08/21/1964)** Male IP Loc: **DISCHARGED**

NEUROPATHOLOGY Ordering MD: **CHEN, CHUN (03358)** Completed: **05/28/2008 00:00**

Specimen #: **MN-08-00599**

DTC: No

COLLECTION DATE: 05/28/2008

SPECIMEN SOURCE:

A. RIGHT L5-S1 DISC

CLINICAL HISTORY:

43 year old male, right radiculopathy

(The above clinical history has been transcribed from the information written on the requisition sheet provided by your office. Please notify us immediately of misinterpretation or errors).

GROSS DESCRIPTION:

Received in formalin labeled "RIGHT L5-S1 DISC" is a 2.5 x 2.5 x 0.5 cm aggregate of multiple irregularly shaped tan gray fragments of soft tissue. Entirely submitted.

Summary of sections: Undesignated 1; Total 1.

Dict: 05/30/08 VB

Trans: 05/30/08 SF

Descriptions and diagnoses were reviewed with Pathology Resident, V. Brodsky, M.D.

DIAGNOSIS:

Disc, L5-S1, discectomy - Disc and ligament with degeneration.

George Kleinman, MD

Attending Pathologist

Division of Neuropathology

SF

The electronic signature indicates that the named Attending Pathologist has evaluated the specimen referred to in the signed section of the report and formulated the diagnosis therein.

Final Diagnosis performed by GEORGE M KLEINMAN, MD Electronically signed 6/3/2008 11:00:13AM

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+ MULTIPLE EXTRUDED DISC FRAGMENT
CAUSING SEVERE COMPRESSION OF THECAL
SAC AND RIGHT S1 NERVE ROOT
+ RIGHT L5-S1 FACET HYPERTROPHY,
LIGAMENTUM FLAVUM HYPERTROPHY AND
RIGHT FORAMEN STENOSIS

IFV: 2000 ML PLASMALYTE

EBL: 100ML

FOLEY CATHETER: 250ML URINE

DRAIN: NONE

PROCEDURE IN DETAIL:

The patient was brought to the operating room and placed on the OR table in the supine position. Appropriated IV access was performed by anesthesiologist. Patient was then induced under general anesthesia and intubated. After intubation 10 mg of dexamethasone, 1.5 gram of Cefuroxime was given intravenously, and Foley catheter was placed.

The patient was then turned into the prone position on the chest bolsters (Wilson's frames) mounted at the Jackson's table in a semi flexed position. All pressure point was padded. The lumbosacral area was prepped with Betadine and draped. The needle was placed in the spinous process, marking L5. The level was verified by fluoroscopy. 0.1ml of methylene blue was injected in order to mark the L5 posterior spinal process.

The midline incision was outlined from L5 to S1. The area was infiltrated with Xylocaine and epinephrine, 1:200,000 unit solutions, a total of 6 ml.

An incision on approximately 4 cm length was made and carried through skin, subcutaneous fat tissue until the superficial fascia. By using #10 scalpel the superficial fascia was opened 5mm right to the midline. Then the right para vertebral muscle dissection was then carried out subperiosteally, exposing the right lateral wall of spinous process and lamina of L5 and S1. The Scoville spinal retractor was placed.

The operative microscope was brought to the surgical field. Under the high magnification, the microsurgical instruments and microsurgical technique were used.

L5-S1 LEVEL

By using Kerrison rongeur, angle curette and dissector of various shape and form, the meticulous microsurgical technique was used in order to perform the right medial facetectomy and right foraminotomy of L5-S1. Heterotrophic yellow ligament was also removed at this level in order to expose right S1 nerves. Noticed the multiple large free disc fragments causing severe compression of thecal sac and right S1 nerve roots. Initially the axilla of the nerve was dissected then several free fragments were removed. Then by using the straight pituitary forceps multiple protruded disc fragments were removed from lateral and anterior to the thecal sac and right S1 nerve root. After the removal of these multiple free fragment then noticed the complete release of

12.Civ. 9078

THE MOUNT SINAI MEDICAL CENTERONE GUSTAVE L. LEVY PLACE
NEW YORK, NY 10029-6574**PROGRESS NOTES**CARTER, DAVID
MRN - 2876043 M
V - 44659397
CHEN, CHUNNSU
8/21/1964
5/28/2008
03358carter vs.
J. Carroll

Enter date, time and title (MD., RN., L.P.N., S.W., etc) in left hand column.

SIGN each entry with first initial, last name and title.
Doctors please add your dictation code number after signature.Date
Time
Title

5/29/08

Hemorrhage (Hem)

P. 05 AM

Admitted to room, place and date.
Surgery and nursing
nursing supervisor and 2 nurses
with physician on line

2/p

S/P right (S-S) microdeleting
V. 05 PM 20 hours

Carter, David 200803358

5/29/08
PM

Rehabilitation Medicine - ACUTE CARE (PT) OT (Circle)

☒ Referral Received☒ Chart Reviewed☒ Patient Seen For Initial Evaluation

Please see completed evaluation in Consult section for details.

Signature

PRINT NAME

Pager No.

917 469 1001

Date

5/29/08



PROGRESS NOTES

CARTER, DAVID
MRN -2876043 M
V - 44659397
CHEN, CHUN

NSU
8/21/1964
5/28/2008
03358

Enter date, time and title (MD., RN., L.P.N., S.W., etc) in left hand column.

SIGN each entry with first initial, last name and title.

Doctors please add your dictation code number after signature.

Date	Time	Title
5/28/08	22:30	Focus: Admit to 8W
RN		<p>Data: Pt rec'd via stretcher from PACU AX03. Pt accompanied by companion from Manhattan Psych. Institute. Pt AX03. MAE 515. speech clear. follows commands appropriately - although Pt fairly agitated. Lings MA BIL. & SOB. rrr. S/S & murmurs/gallop - Denies CP. & denia noted. Pt til PO - appropriate. Denies N/V. Pt T sm. dressing to midline lumbar/sacral region - in ant of minor - noted. dressing intact. Pt GPPA pain 2/10 to lower back - non radiating to front.</p> <p>Action: Pt oriented to met, call bell. Neuro assess and Meds admin as ordered. Percocets admin for c/o pain. Pt Requiring vitals q 15 min. I.S. idu given and enc IVE D50. Pt idu re: POC, Meds, pain mount. relaxation enc to decrease agitation.</p> <p>Prognosis: Pt appear comfortable - report 4/10 T percocet. NAD noted. Assess and to monitor. See physician.</p>

D-1-A-2

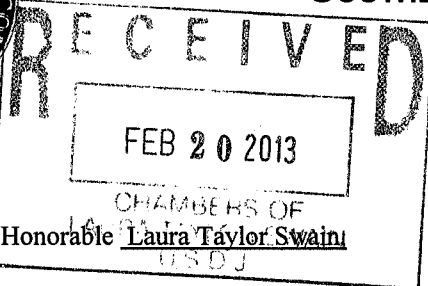
PROGRESS NOTES






UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Pro Se Office



SCANNED

+

To:  The Honorable Laura Taylor Swain
From: V. Noriega, Pro Se Intake Clerk, Docket Services, Ext. 1177

Date: 2/15/13

Re: Carter v. Carroll, 12-cv-09087-LTS

The attached document, which was received by this Office on 2/14/12, has been submitted to the Court for filing. The document is deficient as indicated below. Instead of docketing the document for public access, it has been docketed as a court-view only docket entry. I am forwarding it to you for your consideration. See Fed. R. Civ. P. 5(d)(2)(B), (4).

- () No original signature.
() No Affirmation of Service/ proof of service.
(x) Other: Party submits supporting documents to complaint.

If you memo-endorse the filing, you do not need to return this memorandum to the Pro Se Office. Once your memo-endorsement is docketed and filed, all ECF users on the case will be notified.

In the alternative, please return this memorandum with the attached papers to this Office, indicating at the bottom what action should be taken.



ACCEPT FOR FILING

() RETURN TO *PRO SE* LITIGANT

Comments: <u>THE COURT ACCEPTS THESE</u> <u>MATERIALS AS LRS TO THE</u> <u>COMPLAINT. AP</u>

United States District Judge

Dated:


United States Magistrate Judge

Dated: 2/15/13

HON. ANDREW J. PECK
United States Magistrate Judge
Southern District of New York

DOWNSTATE CORRECTIONAL FACILITY

BOX F

RED SCHOOLHOUSE ROAD

FISHKILL, NEW YORK 12524-0445

NAME:

David Carter

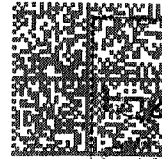
DIN:

12A5083

DOWNSTATE



CORRECTIONAL
FACILITY



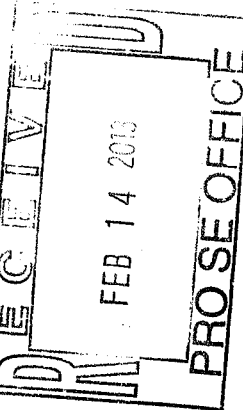
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Legal mail

- Chambers of -

U.S. Chief District Judge

Loretta A. Preska

United States District Court

Southern District of New York

500 Pearl Street

New York, N.Y. 10007